.	06-	27	-01

PTO/SB/05 (2/98) proved for use through 09/30/2000. OMB 0651-0032 demark Office: U.S. DEPARTMENT OF COMMERCE

Patent

OPPlease type a plus sign (+) inside this

UTILITY
PATENT APPLICATION
TRANSMITTAL

PC10877A Attorney Docket No. First Named Inventor or Application Identifier T. Kaneko

PAI	AIENT APPLICATION Plus Named inventor of Application Identified 1. Named								
	TRANSMITTAL	Title	M	ACROLIDE ANTIBIO	TICS				
(Only for new nonprovisional applications under 37C.F.R. §1.53(b)) Express Ma		ail Label No. EL446402369US							
APPLICATION ELEMENTS			Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231						
See MPEP chapter 600 concerning utility patent application contents.				Ni-refebra	-		• -		
2. Sul	*Fee Transmittal Form (e.g., PTO/SB/17) shmit an original, and a duplicate for fee processing) Specification [Total Pages 25] preferred arrangement set forth below)		 Microfiche Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) 					/892081	
-	 Descriptive title of the Invention Cross References to Related Application Statement Regarding Fed sponsored Reference in Microfiche Appendix 			b. Pap		dentica	Copy I to computer copy) dentity of above cop	· - T	
-	- Background of the Invention			ACCOMPA	NYING A	PPLIC	CATION PARTS		
-	 Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure 			8. Assignment Papers (cover sheet & document(s)) 9. 37 C.F.R. §3.73(b) Statement Power of Attorney (when there is an assignee) 10. English Translation Document (if applicable)					
3D	erawing(s) (35 U.S.C. 11.3)[Total sheets	l	11.	Information Statement (Copies of Citations	IDS	
4. 🔲 o	Path or Declaration [Total pages	3]	12.						
	a. Newly executed (original or copy) b. Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]			13. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
				*Small Entit Statement(s (PTO/SB/09	3)	_	ment filed in prior a still proper and des		
	i. <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).			15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
5. Incorporation By Reference (useable if Box 4b is checked)			16.	. Other:	Priority CI	aim			
The entire disclosure of the prior application, from which a				60/215,23	37				
copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.					filed June	30,200	00		
	*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).								
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:									
Continuation Divisional Continuation-in-part (CIP) of prior application No:/									
Prior application information: Examiner Group/Art Unit:									
18. CORRESPONDENCE ADDRESS									
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below									
Name	Paul H. Ginsburg								
Address	Pfizer Inc								
Address	dress 235 East 42nd Street, 20th Floor								
City		State	- 1	New York	Zip Co	ode	10017-5755		
Country	Linited States Of America Tele	anhone	(212)573-2369		Fav		(212)573-1939		

32,140 Registration No. (Attorney/Agent) NAME (Print/type) 6-26-01 Date Signature



	T	ОМЕ		nt and Trademark Office: U.S. DEPARTMENT OF COMMERCE		
= 0				Unassigned		
FEE TRANSMITTAL				Onassigned		
N Potent foce are subject to convent revision on October 1	Filing Date			Concurrent herewith		
These are the feet effective October 1.	First Named Inventor			T. Kaneko		
Gmall Entity payments <u>must</u> be supported by a small entity statement,	Examiner	Name		Unassigned		
otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.	Group/Art	Unit		Unassigned		
Total Amount of Payment (\$) 710.00	Attorney D	_).	PC 10877A		
METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
1. The commissioner is hereby authorized to charge	3. ADDITIONAL FEES					
indicated fees and credit any over payments to:	Large Enti	<u> </u>	mall Entity			
Deposit Account Number :16-1445		ee Fe (\$) Co		Fee Description Fee Paid		
Deposit Account Pfizer Inc	105	130 2	05 65	Surcharge – late fee or oath		
Name						
☐ Charge Any Additional ☐ Charge the Issue Fee Set in	127	50 2	27 25	Surcharge—late provisional filing fee or cover sheet		
Fee Required Under 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance.	139	130 1	39 130	Non-English specification		
	147 2	2,520 1	47 2,520	For filing a request for reexamination		
2. Payment Enclosed:	112	920* 1	12 920*	Requesting publication of SIR prior to		
☐ Check ☐ Money Order ☐ Other	113 1	,840* 1	13 1,840*	Examiner action Requesting publication of SIR after Examiner action		
FEE CALCULATION	115	110 2	15 55	Extension for reply within first month		
1. BASIC FILING FEE	116	390 2	16 195	Extension for reply within second month		
Large Entity Small Entity	117	890 2	17 445	Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	118 1	,390 2	18 695	Extension for reply within fourth month		
101 710 201 355 Utility filing fee 710.00	128 1	,890 2	28 945	Extension for reply within fifth month		
106 320 206 160 Design filing fee	119	310 2	19 155	Notice of Appeal		
107 490 207 245 Plant filing fee	120	310 2	20 155	Filing a brief in support of an appeal		
108 710 208 355 Reissue filing fee	121	270 2	21 135	Request for oral hearing		
114 150 214 75 Provisional filing fee	138 1	1,510 1	38 1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 710.00			40 55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES	141 1		41 620	Petition to revive - unintentional		
Extra Fee from Claims below Fee Paid	142 1	,240 2	42 620	Utility issue fee (or reissue)		
Total Claims 10 -20**= 0 0 = 0	143	440 2	43 220	Design issue fee		
Independent 1 - 3**= 0 X 0c = 0	144	600 2	44 300	Plant issue fee		
Multiple Dependent = 0	122	130 1	22 130	Petitions to the Commissioner		
** or number previously paid, if greater; For Reissues, see below Large Entity Small Entity	123	50 1	23 50	Petitions related to provisional applications		
Fee Fee Fee Fee Description Code (\$) Code (\$)	126	240 1	26 240	Submission of Information Disclosure Statement		
103 18 203 9 Claims in excess of 20	581	40 5	81 40	Recording each patent assignment per property (times number of properties)		
102 80 40 Independent claims in excess of 3	146	710 2	46 355	(37 CFR 1.129(a))		
104 270 204 135 Multiple dependent claim, if not paid	149	710 2	49 355	For each additional invention to be examined (37 CFR 1.129(b))		
109 80 · 209 40 **Reissue independent claims over original patent	Other Fee (sp	ecify)				
110 18 210 9 **Reissue claims in excess of 20 and over original patent	Other Fee (specify)					
SUBTOTAL (2) (\$) 0	*Reduced by		g Fee Paid	SUBTOTAL (3) (\$)		
SUBMITTED BY	r Į.	Complete (if Applicable)				
Type or Printed Name SETH H. JACOBS	Date	6/2 6/ 01		Reg. Number 32,140		
Signature	Date	0/- 0/01		Deposit Account User ID		



CERTIFICATE OF MAILING - EXPRESS MAIL

PFIZER DOCKET NO: PC10877A

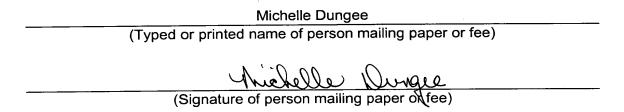
TITLE: Macrolide Antibiotics

APPLICANT: Richard D. Hedde.

"Express Mail" mailing label number **EL446402369US**

Date of Deposit June 26, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Commissioner for Patents, Box Patent Application, Washington, DC 20231.



Pfizer Inc Patent Department, 20th Floor 235 East 42nd Street New York, NY 10017-5755